## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/8/0,094

									1018	10/	7 P	
CLAIMS AS FILED - PART I									ENTITY	•	ОТНЕ	R THAN
	OTAL CLAIM	S of		(Column 1)		(Column 2)		TYPE		OF	SMAL	L ENTITY
			)			<u>.</u>		RATE	FEE		RATE	FEE
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FI	EE 385.0	O OF	BASIC FE	E 770.00
TOTAL CHARGEABLE CLAIMS			20 1	20 minus 20=		· O		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3			2		X43=	1	OR	.X86=	
М	ULTIPLE DEPE	NDENT CLAIM	PRESENT	RESENT				+145=	<del>                                     </del>	7		
*1	f the differenc	e in column 1 is	s less than	zero, enter	"0" in (	column 2	Ĺ	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>	OR	•	1770
		(Column 1)		(Colum		(Column 3)	Column 3) SMA			OR		R THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE
NON	Total		Minus	**	_	=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***		=		X43=		OR	X86=	1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1	1 1	.200-	
1, 11, 19								TOTAL		OR	+290=	<u> </u>
								DIT. FEE		JOR ,	ADDIT. FEE	
_	<del></del>	(Column 1)	· · · · · · · · · · · · · · · · · · ·	(Colum		(Column 3)						
Ξ.		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***				X43= ·		OR	X86=	
	FIRST PRESE	NTATION OF ML	JUIPLE DEI	PENDENT	LAIM	· []		145=		OR	+290=	
											TOTAL	
(Column 1) (Column 2) (Column 3)										1 · A	DDIT. FEE	
		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	lotai e	*	Minus	**		=	T	\$ 9=	, ,,		X\$18=	FEE
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. [	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ľ	43=		OR	X86=	
. 16 -	If the entry in column 1 is less than the array									OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***OTAL ADDIT. FEE												
Th	e *Highest Numb	per Previously Paid	For" (Total or	Independent)	is the h	s, enter "3." ighest number f			opriate box			